

MAINE PUBLIC HEALTH ALERT NETWORK SYSTEM



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*****ADVISORY – Important Information*****

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TO: All Maine Health Alert Network Recipients

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Guidance for Day and Residential Camps to Address Novel H1N1 Virus
June 25, 2009

This health advisory provides guidance on suggested means to reduce the spread of the novel influenza A (H1N1) virus in day, residential, or overnight camp settings based on current knowledge of the H1N1 pandemic.

Summary of Current Situation

At least 12 states have seen camp-associated outbreaks among staff and/or campers, and some camps, such as those sponsored by the Muscular Dystrophy Association, have been cancelled because of the very high risk for complications of those specific campers.

Maine has seen outbreaks in 5 residential camps in 5 counties (Androscoggin, Cumberland, Lincoln, Oxford, and York) involving 10 confirmed cases in counselors. Other possible outbreaks involving camps are currently being investigated. No campers so far have been reported with H1N1.

While guidance has been sent through mail and email to all licensed camps in Maine over the past few weeks, and camp guidance has been listed on several prior health advisories, we are issuing this health advisory specific for day and residential camps in order to heighten attention to this important setting for prevention and mitigation efforts.

The overall strategies that all group settings, including day and residential camps, should adhere to include: **prevention**; **screening** in order to identify those who are ill early; **mitigation** such as isolation; and appropriate **treatment**. **Camp Directors and/or their medical staff should contact Maine CDC immediately to report any suspect cases of H1N1 and for guidance on outbreak control and treatment. Maine CDC is also available for guidance on prevention, screening, and mitigation planning. Contact information is at the end of this health advisory, and for camp officials includes the 24x7 clinical consultation line of 1-800-821-5821.**

Novel Influenza A (H1N1)

The symptoms of influenza usually include fever plus at least either cough or sore throat. These symptoms are often referred to as an influenza-like illness (ILI). Influenza infection can also lead to additional symptoms like headache, tiredness, runny or stuffy nose, body aches, chills, diarrhea, and vomiting. Like seasonal flu, novel influenza A (H1N1) infection in humans can vary in severity from mild to severe. When severe, pneumonia, respiratory failure and even death are possible. See [What to Do If You Get Flu-Like Symptoms](#).

Novel influenza A (H1N1) is thought to spread in the same way that seasonal influenza viruses spread, mainly through the coughs and sneezes of people who are sick with the virus. People may also become infected by touching something with flu viruses on it and then touching their mouth or nose. See [What to Do If You Get Flu-Like Symptoms](#).

General Recommendations and Preparedness for Camps

- **Plan for possible contingencies during this summer camp season.** Plans should include what to do if staff or camp participants become ill, including how to separate them from others to limit spreading influenza to other staff and campers, when to seek additional medical evaluation, and how to provide care for them. Camp administrators should work with the health department (see resource section below) to develop mechanisms and protocols for monitoring ILI and any requirements for reporting ILI among campers or camp staff.

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- Review any applicable state laws regarding camp requirements around public health issues. Assure compliance with these requirements. See [Camps and State Regulations](#)
- Consider pre-planning with parents/guardians regarding how illnesses or health emergencies among children attending the camp will be handled. Arrangements should also be made with the parents/guardians of staff, volunteers and other campers who are legally minors. Include logistics for transportation of ill persons for medical care or return home that limits exposures to other persons, multiple ways to contact parents/guardians, agreement for care and isolation at the camp (if applicable), and planning for additional medical evaluation or emergency care.
- **Train all camp staff regarding** communicable disease prevention including specific information on how to recognize ILI and how to report possible cases of ILI to camp leadership.
- **Educational materials and information should be provided to campers** in a way that is age-appropriate and can be understood by both English and non-English speakers. Spanish-language materials are available at: [CDC H1N1 Flu \(in Spanish\)](#). Materials and information in other languages are available at: [CDC websites in other languages](#) and [Illinois Department of Public Health](#).

Prevention: General Infection Control Recommendations

Educate all persons to effectively cover their cough or sneeze with a tissue or elbow and use good hand hygiene. Insuring that all people are strictly adhering to excellent respiratory hygiene is imperative to preventing the spread of H1N1, and this insurance is a shared responsibility of all staff and participants.

See [Interim Guidance for Infection Control for Care of Patients with Confirmed or Suspected Novel Influenza A \(H1N1\) Virus Infection in a Healthcare Setting](#)

- Hand washing facilities including running water and liquid hand soap should be readily accessible; alcohol-based hand sanitizers may be used if hands are not visibly soiled.
- Plan ahead to ensure that enough alcohol-based hand sanitizers are available for situations where it is known that hand washing facilities may not be available, for example during hikes.
- Clean all areas and items that are more likely to have frequent hand contact (like doorknobs, faucets, handrails) routinely (e.g., daily, before/after meals, as needed) and also immediately when visibly soiled; use the cleaning agents that are usually used in these areas; it is not necessary to conduct disinfection of environmental surfaces beyond routine cleaning. See [Clean Hands Save Lives!](#)

Screening: Reduction of Risk of Introduction of Novel H1N1 Virus into the Camp Setting

- **Provide camp attendees, staff and volunteers with materials prior to arrival at the camp to notify them that they are not allowed to attend camp if they have had an ILI in the 7 days prior to the start of the camp. In addition, they should be reminded that if they have been exposed to a person with novel H1N1 or ILI in the 7 days prior to the start of camp, they may attend camp but should closely self-monitor and report development of ILI symptoms immediately.**
- **Consider active screening of ALL newly arriving camp attendees, staff and volunteers by asking if they have had any symptoms of ILI in the previous 7 days.** Provide education to individual campers about reporting ILI. A careful health history of each arriving camper should be taken. Note any conditions that may place them at high risk for complications of influenza.

- Camp attendees, staff and volunteers should be instructed to immediately inform camp management if they currently have or have had an influenza-like illness (ILI) in the 7 days prior to arrival.
- **Persons who currently have or have had ILI in the previous 7 days should not attend camp for 7 days after their symptoms began or until they have been symptom-free for 24 hours, whichever is longer.**

Mitigation and Treatment: Rapid Detection and Management of Cases of ILI in the Camp Setting

- Camp staff and volunteers should be diligent about early recognition of illness and rapid isolation of those that are experiencing ILI symptoms. See Interim Guidance for Clinicians on Identifying and Caring for Patients with Swine-origin Influenza A (H1N1) Virus Infection
- **Campers who develop ILI should be immediately separated from the general population** and kept away from well campers until they can be safely returned home or taken for medical care, if needed, OR for at least 7 days after symptoms began or 24 hours after symptoms resolve, whichever is longer (if the child is to remain at a residential camp).
- **Protocols should be in place for when medical evaluation of persons ill with ILI should be done and how monitoring will be conducted.** Not all patients with suspected novel influenza (H1N1) infection need to be seen by a health care provider. Patients with severe illness and those at high risk for complications from influenza should contact their medical provider or seek medical care.
- Aspirin or aspirin-containing products should not be administered to any person aged 18 years old and younger with a confirmed or suspected case of influenza virus infection, due to the risk of Reye syndrome. Refer to pediatric medical management for guidance regarding use of any medications, especially those containing aspirin. See Novel H1N1 Influenza: Resources for Clinicians.
- **Further information on care for persons with ILI can be found at:**
 - Interim Guidance for H1N1 Flu (Swine Flu): Taking Care of a Sick Person in Your Home
 - Interim Guidance for Infection Control for Care of Patients with Confirmed or Suspected Novel Influenza A (H1N1) Virus Infection in a Healthcare Setting
 - Antiviral Drugs and H1N1 Flu (Swine Flu)
- **If individual rooms for persons with ILI are not feasible, consider using a large room, cabin or tent specifically for ill persons with beds at least 6 feet apart and, if possible, with temporary barriers between beds and nearby bathroom facilities separate from bathrooms used by healthy campers.**
- Linens, eating utensils, and dishes used by those who are sick do not need to be cleaned separately, but they should not be shared without thorough washing. Linens (such as bed sheets and towels) should be washed in hot water using laundry soap and tumbled dry on a hot setting. Individuals should wash their hands with soap and water immediately after handling dirty laundry.
- Designate staff to care for ill persons and limit their interaction with other campers during their shift to decrease the risk of spreading influenza to other parts of the camp. See Antiviral Chemoprophylaxis for Novel (H1N1) Influenza.
- **Anyone with a medical condition that would increase their risk of severe illness from influenza, including pregnant women, should NOT be designated as caregivers for ill persons.**
- For proper technique in caring for an ill person, refer to the following guidance: Interim Guidance for H1N1 Flu (Swine Flu): Taking Care of a Sick Person in Your Home.

- For information on the use of **masks and respirators**, see: Interim Recommendations for Facemask and Respirator Use to Reduce Novel Influenza A (H1N1) Virus Transmission.
- **Close contacts (such as roommates) of persons with ILI should be encouraged to self-monitor for ILI symptoms and report illness to camp officials.**

Persons at High Risk of Complications from Influenza Infection

- **Persons at increased risk of severe illness from influenza include: people older than 65 years, children younger than five years, pregnant women, and people of any age with certain chronic medical conditions, like diabetes, asthma, immune-suppression, or chronic lung disease.** See Interim Recommendations for Facemask and Respirator Use to Reduce Novel Influenza A (H1N1) Virus Transmission
- Information on care of certain groups at increased risk of severe illness from influenza can be found at the following links.
 - Pregnant Women and Novel Influenza A (H1N1) Considerations for Clinicians
 - H1N1 Flu and Patients With Cardiovascular Disease (Heart Disease and Stroke)
 - Interim Guidance—HIV-Infected Adults and Adolescents: Considerations for Clinicians Regarding Novel Influenza A (H1N1) Virus

For More Information Regarding H1N1 and Influenza Preparedness

- **Maine CDC H1N1:** <http://www.maine.gov/dhhs/boh/swine-flu-2009.shtml>
This is also found through the Maine CDC's homepage:
www.mainepublichealth.gov
- **US CDC H1N1:** <http://www.cdc.gov/h1n1/>
- **Maine CDC's 24 hour clinical consultation line for health care providers or camp officials needing to report a suspected case, obtain testing information, and/or obtain clinical or public health guidance for prevention, screening, mitigation of outbreaks, or treatment: 1-800-821-5821.** Camp site visits by medical or nurse epidemiologists from Maine CDC are also possible in order to advise on outbreak control.
- **Maine CDC Health Advisories** can be subscribed to via the Health Advisory RSS Feed at www.mainepublichealth.gov.
- **Posters and Flyers**
<http://www.maine.gov/dhhs/boh/Flu%20Posters.htm>
<http://www.cdc.gov/h1n1flu/flyers.htm>
- **Foreign Language, Deaf/Hard of Hearing Materials**
<http://www.maine.gov/DHHS/boh/h1n1-foreign-lang-resources.shtml>
- **Social Media Resources on H1N1**
<http://www.cdc.gov/socialmedia/h1n1/>
- Association of Camp Nurses